

## **Commonwealth of Virginia Corporate Travel Card Employee Agreement**

I, \_\_\_\_\_, acknowledge receipt of an American Express Corporate Travel Card. As a Cardholder, I agree to comply with the following terms and conditions regarding my use of the Card.

1. I understand that I am being entrusted with a valuable purchasing tool and will be making financial commitments on behalf of myself and will strive to obtain the best value for the agency.
2. I understand that I am liable to American Express for all authorized charges made on the Card.
3. I agree to use this Card for official state business travel only and agree not to charge personal purchases. I understand that my agency will review the use of this Card and the related management reports and take appropriate action on any discrepancies.
4. I will follow the established procedures for the use of the Card. Failure to do so may result in either revocation of my privileges or other disciplinary actions, including termination of employment.
5. I agree to return the Card immediately upon request or upon termination of employment (including retirement). Should there be any organizational change that causes my cost center to likewise change, I also agree to return my Card and arrange for a new one, if appropriate.
6. If the Card is lost or stolen, I agree to notify the Travel Program Administrator and American Express immediately.

\_\_\_\_\_  
Employee Signature/Date

\_\_\_\_\_  
Agency and Cost Center

\_\_\_\_\_  
Employee Social Security Number

\_\_\_\_\_  
Supervisor's Signature/Date

\_\_\_\_\_  
Program Administrator's Signature

\_\_\_\_\_  
Date